SUMMARY SHEET

| | Change in Company's premium or rate | e level produced by rate revision effective | July 1, 2011 |
|---------------------------------|--|--|--|
| | (1) | (2) Annual Premium | (3) Percent |
| | <u>Coverage</u> | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | • |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage Private Passenger Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Medical Malpractice | \$2,246, 836 | -21.8% |
| | Line of Insurance | | |
| Rate | level impact varies by territory/class | ritories) or certain classes? If so, specify: Suffer Suff | Ancillary Healthcare |
| Rate speci share incre | and Rule Revision including but not ialty classes and territories), (2) revised limit business entity coverage prereased limits factors, (6) revised claim | limited to: (1) revised manual rates (inclinated to: (1) revised manual rates (inclined extended reporting period coverage ranium charges (4) new and revised deducts-free discount, (7) revised Schedule Rate Rating Plan and (9) elimination of group | luding new and revised rules, (3) revised separate and ctible discounts, (5) revised ting Plan and revised |
| * A | diusted to reflect all prior rate changes | | |

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

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The Doctors Company, an Interinsurance Exchange

Name of Company

JUN 17 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Michael O'Donome

Michael O'Donohue-Vice President
Official - Title